Ligament Bracing Solutions

Ordered by:			Phone # ()			
BILLING: P.O. Number			Townsend Account #			
Bill To:			Address: City: State: Phone: (2-Day A.M. [•	Country: Fax: () _ Next Day A.N	1.
Patient's Last Name: Patient's First Name: Male Female Age Weight (LBS) Height (IN) Leg: Left Right			Thigh Sleev 1/16 Com Size X-Small X-Large	ves* Infort Thigh Sleev Small XX-Large (Pro model only)	☐ Medium ☐ XXX-Large	□ Large
Rebel	Rebel Pro	Rebel Lite (only made in 13" length)	Sizing Refer	rence		
☐ ACL	☐ ACL	☐ ACL		6" above	M-L width	6" below
☐ Combined	☐ Combined	☐ Combined	X-Small	12.5" to 15.5"	3" to 3.5"	11" to 12.5"
XXX-Large Size Available On Rebel Pro Only			Small	15.5" to 18.5"	3.5" to 4"	12.25" to 13.75"
Thigh Shell Length ☐ 7 Inch ☐ 8 Inch			Medium	18.5" to 21"	4" to 4.5"	13.25" to 15"
Tibia Shell Length ☐ 6 Inch ☐ 7 Inch ☐ 8 Inch			Large	21" to 23.5"	4.5" to 5"	14.25" to 15.75"
XXX-Large Size Available 14" Configuration Only			X-Large XX-Large	23.5" to 25" 25" to 28"	5" to 5.5" 5.5" to 6"	15" to 17" 17" to 19"
TM5+ Hinges (Includ	des Extension Stops)		XXX-Large*	28" to 31"	6" to 6.5"	17 to 19
☐ Optional Flexion Stop Kit* ☐ Add optional extension assist bands/posts* (Pro Model Only)			3 Measurements: "Customized" Assembly (No Added Charge)			
Standard Colors (In stock) ☐ Argento Gray ☐ Textured Black			If your patient has proportional leg sizing (see sizing reference, above) or if you are ordering a brace for stock inventory please select from the size options. However, if you would prefer to have Townsend customize the assembly of your patient's brace at no addition charge please provide leg measurements beside the illustration, below.			
Non-stock Colors (Brace may ship next business day)						
☐ Bengal Silver						
☐ Bengal Yellow ☐ Bengal White ☐ Violet	☐ Gloss Black ☐ Electric Blue ☐ Sky Blue ☐ Sparkle Copper	☐ Candy Green☐ Sparkle Red			Circumference 6 inches above mid-patella	1
☐ CS Package* (For dynamic compression and enhanced suspension)			Medial-Lateral Knee Width			
☐ Anti-Migration Silicon Infused Strap Pads*				M 71	(not circumference	re)
☐ Spooner Patella Stabilizing Attachment*					at knee center	
Brace Cover*					Circumference — 6 inches	
☐ Posterior Closure Style ☐ Pull On Style			below mid-patella			
Undersleeves*			Please complete and fax this form to 800.798.2722 (24-hours a day). If you are calling in your order, this form indicates the options and information			
☐ 18" Cotton	☐ 18" Neoprene	☐ 22" Neoprene	that will be required by our staff. For phone orders, please call 800.700.2722 between 6:00 a.m. and 4:00 p.m. (PST).			